## UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

RECEIVED SDNY PRO SE OFFICE

2020 NOV 24 PM 12: 42

Michael Lee et, al.	20-cv-10126	
Write the full name of each plaintiff.	No. 1:26 - CV- 08401-GBO - SDA (To be filled out by Clerk's Office)	
-against-	AMENDED COMPLAINT	
Department of Corrections et, al.	(Prisoner)	
	Do you want a jury trial? ☒ Yes □ No	

Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.

#### NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

### I. LEGAL BASIS FOR CLAIM

State below the federal legal basis for your claim, if known. This form is designed primarily for prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

"Bivens" action (against federal d	efendants).		
☑ Violation of my federal cons	titutional rights		
DO Other: Equal Protect	tion CouselRights'	Cruel and Unusual Punc	tom la
II. PLAINTIFF INFORM		and of the fibral	<u> NATIONI</u>
	-	liai l :£	
Each plaintiff must provide the fo		· -	
Michael J.	Lee (	See V. FACTS & VI Ho	يروز م )
First Name Middle	Initial Last Name		
State any other names (or differe you have used in previously filing 3492061663		e ever used, including any name	
Prisoner ID # (if you have previou	· ·	stody, please specify each agency	
and the ID number (such as your	DIN or NYSID) under which you	were held)	
Vernon C Baine	Zenter		
Current Place of Detention			
1 Halleck Street			
Institutional Address			
Bronx	Mari Y	14474	
County, City	New Tork State	Zip Code	
III. PRISONER STATUS		p	
Indicate below whether you are a	prisoner or other confined per	son:	
🛛 Pretrial detainee	•		
$\square$ Civilly committed detainee			
☐ Immigration detainee			
☒ Convicted and sentenced pri	soner		
☑ Other: Pos \a's			

### **EFENDANT INFORMATION**

it of your ability, provide the following information for each defendant. If the correct in is not provided, it could delay or prevent service of the complaint on the defendant, that the defendants listed below are identical to those listed in the caption. Attach pages as necessary.

First Name	Last Name	Shield #
New York D	epartment of Correc	tions Commis
Current Job Title (or	r other identifying information)	
Current Work Addre	ess	
County, City		<u></u>
	State	Zip Code
Patsy	Yang	<u> </u>
First Name	Last Name	Shield #
Health Dire	ctor Commisioner	
Current Job Title (or	other identifying information)	
<b>Current Work Addre</b>	<u> </u>	
County, City	State	Zip Code
<b>.</b> .		-,p codc
Machet	Feno	
Marget First Name	Egan Last Name	Shiold #
First Name	Last Name	Shield #
First Name	Last Name Correction Executive	
First Name	Last Name	
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First Name	Last Name <u>orrechon Executive</u> other identifying information)	
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First Name  30 acd of C  Current Job Title (or	Last Name <u>orrechon Executive</u> other identifying information)	
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First Name  30 40 5 C  Current Job Title (or  Current Work Addre  County, City  First Name  Current Job Title (or	Last Name  orcection Executive other identifying information)  ess  State  Last Name  other identifying information)	Director  Zip Code

Page 3

### V. STATEMENT OF CLAIM

Place(s) of occurrence: Vernon C.Baine Center Dorni 2-BA

Date(s) of occurrence: September 22mg 2020 - November 19th, 2020

FACTS: (continued on (5) Therein)

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

listed below has had there Constitutional the Defendents by J-BN Mandates Violatina Bill Delblasio Now 50% Capacit 2BA HOUSINA Punish meat Rights bel 5 next Rights against our たろり(ら) True for the

	Case 1:20-cv-10126-VEC-SDA Document 2 Filed 12/01/20 Page 6 of 11
	Joe Brewton#3492002387
	Mario Espinal # 3492002562
	George Macedon # 3492003165
	Flores Inse 349-200-2283
	Jonathan Morales # 14/2002971
	Cabral VIctor # 14/2001723
	Parris V. Colon # 141-2002-813
	Daygran thron # 412002936
	PHAM LAM # 89519011.67
v*	Joe Brewton # 349-2002-387
	Juan Ortiz #349-2002-305.
<u>.</u>	
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	Pearson#3002006233
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A. A. C.	and Persond #
	34165
Shamar Calloway # 4412001754 Chastophe	er Johnson#
Keemal Cross#1411710237 349200	02320
Deryck Brown #241180650 Morris	Tate# 3412001025
Hakiem Barrow # 825000054 For Strut	ther 5#5102000007
Devoir Parker # 9002000003 Jonally	~ Weaver#14/2001833
Theodore Tucker # 3492001370 Edwar	d Branch # 3002006827
James Jackson#1411904748 Orlando	Plummer # 10'
Ricardo Gilcaberg#141200522 44120	061257
Emmquel Rosario#3492001164 Allen 1	Nimmon3#
Manuel Velasquez # 3482001339 349.	3003669
Willet Davidson# 3491965326 James	Evan5#24/2001523
Darius Batts #3491904664 Luis ch	narles#1412062870
(5)	

VI. RELIFFS (continued)	
4). People with non-violant charge(s) Except:	
If a person Health Condition's make them unburable	
to the virus with violent charges would consider	
R.OR	
Next is Compensative Damages for "EACH"	
Plaintiff in this Complaint in AMOUNT of \$250,000	
a piece For Constitutional Right violations listed Herein	
to be payed by Defendants in this COMPLATION	
"Additional" Punitive Danges for EACH"	
Plaintiff in this COMPLATINT in the AMount of	
\$250,000.00 a piece for the Constitutional	
Right violations listed Herein to be payed by	
Defendants in this COMPLAINT	
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# VII. PLAINTIFF'S CERTIFICATION AND WARNINGS (See Attached letter

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

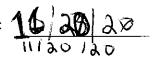
I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

10/30/9	1 20 michael 1. La			
Dated			,	
Michael	J. Lee	-		
First Name		Last Name		
1 Halleck St	(1/4)	Plaintiff(s)	Address	Herein)
Prison Address		,	114)	Blaintiffs)
Bronx	N.X.		10474 (00)	Plaintiffs)
County, City	State		Zip Code	• /

Date on which I am delivering this complaint to prison authorities for mailing:







Dear Clark of Cou	4:
We are All within	to you to AMFNO
the U.S.C.A 81983	DMPLAINT Annexed herein
Due to lock of abil	ty to do legal Research
we were unde to	put down All the
Constitutional Righ	+ violations prior to this
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Kights Visiation(5)	that the Defendants violated,
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clark court Attach Ex	HTBTS Listed in Original Complant
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MICHAEL FEE #344 9 DOLOC? V.C. G. C Case 1:20-cv-10126-VEC-SDA Document 2 Filed 12/01/20 Page 11 of 11 1 Halleck St. Bronx, N.X. 10474



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Pro Se

AHN: Clerk of Court

SUNITED STATES

SOUThern District Court of New York State 500 Pearl Street COUM HOUSE New York, N.X. 1000]